

OCTOPUS 301/311

User's Manual

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1 PARTS DELIVERED

We are pleased that you have selected an OCTOPUS 301/311, the only direct projection perimeter. Depending on what you ordered, the parts you receive may consist of

- The OCTOPUS 301/311
- Set of accessories
- Instrument table
- Printer

Check the delivery for completeness

1 OCTOPUS perimeter 301/311	4-0692-0100
1 Set of accessories containing	4-0692-5100
1 Patient response button	4-0695-0040
1 Power cord	7-0052-900x
1 Dust cover	4-0692-5101
1 User's Manual	4-0200-0800
1 Ocular cover	4-0571-0114
3 Touch pens	7-0369-9001
1 Eye occluder	4-0692-5150
2 FuesT3.15 A / 250 V	7-0027-0348
1 Allen wrench 2.5mm	9-0174-9006
1 Screwdriver	4-0692-5102
1 Instrument table for the OCTOPUS 301/311	4-0670-0100 or 4-0693-0100
1 Table top	4-0670-0260 or 4-0693-0220
1 Set of accessories	4-0670-0250 or 4-0693-0300
1 Power set	4-0670-11x0
1 Printer	
1 USB connection cable	

Please carefully preserve the packing material so it can be used again if the instrument has to be returned or moved.

2 SAFETY INSTRUCTIONS

2.1 General

- This instrument can only be used for the purpose as described in this manual.
- The examination of the patients, the operation of the instrument and the interpretation of the results can only be performed by persons who are experienced and who have been trained accordingly.
- The instrument is to be installed on the height-adjustable table and employed in a dimly lit room in a medical area.
- Keep this User's Manual there where persons who operate the instrument can consult it at all times. Guarantee claims can only be valid when the instructions in the User's Manual are followed.
- The doctor or operator is to instruct the patient in the safety instructions and check that they are observed.
- Make sure that the instrument is connected only to the power source as defined on the perimeter rating plate. The on/off switch does not separate the perimeter from the power lines. Before maintenance or cleaning work is performed, the power cord must be removed from the wall socket.
- Removal of the housings and repairs to the instrument are permitted only by trained and authorized technicians. Considerable danger for the operator and patients can be caused by improper repairs.
- Only original replacement parts and original accessories are permitted for repairs.

2.2 Instrument Transportation

Transport the instrument over large distances in the original packing. For short distances the instrument can be lifted using the two lower housing sides. Two ribbed grips are provided on the left and right sides which prevent from slipping sideways.



**Do not use the forehead rest of the perimeter as a carrying handle.
This plastic part is not adequate for the weight and can be thus broken.**

2.3 Symbols used

In addition to other entry possibilities the following symbols are used for operating the perimeter:

Main Monitor Screen



Examination preparing and performing



Analysis of examination results



Configuration, Setup

Examination

	Female patient
	Male patient
	Delete all entered items, set examination parameters to standard values
	Sort patient file according to name or examination date
	Select parameter
	Scroll patient file upwards or downwards
	Select all examinations
	Remove selection
	Switch to monitoring examination progress
	Switch to monitoring patient eye
	Horizontal fine positioning
	Vertical fine positioning

Data Analysis

	Display the next selected examination (page forward)
	Display the previously selected examination (page backwards)
	Sort examination file according to name or examination date
	Scroll examination file upwards or downwards
	Print
	Store changes

Setup

	Select parameter
	Store selected parameter
	Back to previous screen
	Back to main screen

Messages, Errors



Messages, information



Error messages

Warning



Warning against hazard

2.4 Special Notices in the Text

Further safety instructions are put into the text as needed. They vary in importance and should help preclude risks for the patient and operator, hinder damage to the perimeter and insure optimal functioning.

ATTENTION: Instruction which must be followed to preclude risks to the patient and operator.

WARNING: Instruction which must be followed to hinder damage to the perimeter.

TIP: Tip for insuring optimal functioning of the perimeter.

In this handbook all of the functions of the OCTOPUS 301/311 are described. Some functions are offered as options and may not be implemented or accessible in your instrument.

3 GUARANTEE CONDITIONS

- The instrument and accessories were manufactured from high quality materials and according to the newest methods and left our factory in perfect condition. If you should nevertheless have any complaint, please contact your representative.
- The manufacturer guarantees the instrument for one year beginning with the date of purchase. The guarantee covers disorders and defects due to the materials and design. Excluded from the guarantee are disorders and defects due to improper usage and outside influences as well as expendable items such as lamps, ink cartridges, etc..
- Every guarantee coverage will be denied if an intervention was made by an unauthorized person.
- Before the instrument is unpacked, check whether there are traces on the packing of improper treatment or damage is evident. If present, advise the transport company who brought the article. Unpack the instrument together with a representative from the transport company. Make a protocol concerning possible damaged parts which you and the transport firm representative should then sign.

4 INTRODUCTION

4.1 OCTOPUS Perimeter 301/311

The OCTOPUS 301/311 is a direct projection perimeter for examinations of the central visual field (30°). It is a stand-alone system, which means, the examination and control units are integrated into the instrument.

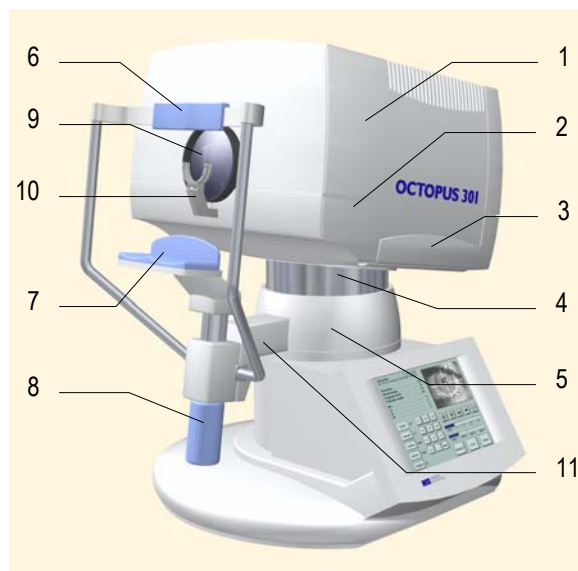


Figure 4-1

- 1 Optical unit with upper housing
- 2 Lower housing (left and right)
- 3 Grip locations (left and right)
- 4 Rotation and height adjustable instrument column for fine positioning
- 5 Headrest with
 - 6 Forehead rest with integrated sensors
 - 7 Chin rest
 - 8 Turning knob for chin rest positioning (rough positioning)
- 9 Ocular
- 10 Trial lens holder with IR eye illumination
- 11 Connector for patient response button



Figure 4-2

- 12 Turning knob for image focusing
- 13 Operating unit with LCD monitor and Touch module
- 14 Instrument base with Connector panel and Power supply



Figure 4-3

- 15 Connector panel with
 - 16 Power switch
 - 17 Power connector
 - 18 Printer connector (USB)
 - 19 Serial interface (RS 232)
 - 20 Ethernet connector
 - 21 Ethernet control lights
 - 22 Contrast LCD monitor

Electrical fuses are located on the bottom of the instrument base plate.

ATTENTION:

All external devices connected to the connector panel must comply with the corresponding safety standards.

4.1.1 Optical Unit

HAAG-STREIT is the only company which offers perimeters with a direct projection system (OCTOPUS 301 / 311 / 1-2-3). The stimuli are projected directly into the patient's eye via the optical unit, which replaces the cupola. This technique does not require a darkened room for examinations.

4.1.2 Headrest

A slightly tilted headrest permits the patient to maintain a comfortable posture during the examination. Sensors in the forehead rest provide information about the correct position of the patient's head.

4.1.3 Trial Lens holder

If necessary, trial lenses can be used during the entire duration of the examination. The stimulus is seen at infinity and thus only a correction for distance is required. The trial lens holder can be swung forwards approximately 25° for changing the trial lens in comfort.

4.1.4 Housing

The optical unit and the electronics are protected by a housing with three sections. The optical unit and the electronics of the OCTOPUS 301/311 are accessible after the upper section of the housing has been removed (4 screws).

WARNING: Before opening the instrument must be made safe by removal of the power cord. Housing parts may only be removed by trained and authorized technicians.

4.1.5 Operating Unit

The operation of the instrument takes place in clear text via the Touch Screen. Information is made available via a color LCD monitor. The contrast of the display can be adjusted using the screwdriver contained in the accessories (see position 22 in Figure 4-3).

Operation and data entry occurs by touching the data entry module with the finger or with the touch pen which is included in the accessories. When alphanumeric entries are requested, a keyboard is shown in the lower half of the display.

WARNING: In order to protect the module surface, **do not employ a pointed object** (ball point pen, pencil, etc.) for entering the data.

4.1.6 Patient Response Button

The patient response button is connected on the underside of the headrest holder (RJ11 connector).

4.1.7 External Connections

Connection possibilities for a printer (USB interface) and for a PC (RS 232 and Ethernet interface) are provided on the connector panel.

4.1.8 Light Sources

LEDs are built in for background illumination, fixation targets and stimulus. LEDs produce no waste heat and thus no active cooling is required.

4.1.9 Light Intensities

The light intensity of the stimulus and background are measured with independent photo sensors and are calibrated to their preset reference values every time the perimeter is switched on.

4.1.10 Stimulus

The duration and brightness of the stimuli are controlled electronically. A mechanical shutter and optical attenuation elements are unnecessary.

4.1.11 Fixation Monitoring

The eye of the patient being examined is illuminated with IR LEDs, recorded using a CCD camera and displayed on the LCD monitor. The built in automatic patient monitoring guarantees the reliability of the examination results. The fine positioning of the examined eye takes place via a motorized fine adjustment of the optical unit.

4.1.12 Examination Data

The built in data storage offers room for 48 examinations. Examination results can be shown on the built in LCD monitor, issued on the printer connected to the USB interface and / or transmitted over the serial interface to a PC.

4.2 Instrument Table

An electrically adjustable instrument table (optional) makes it possible to comfortably adjust the height of the instrument to the individual size of the patient.



- 1 Table top with holder for patient response button
- 2 Electronics box
- 3 Patient response button
- 4 Electrical column
- 5 Table foot

Figure 4-4



- 6 Voltage selection switch on the electronics box
- 7 Power connector for attaching the OCTOPUS 301/311

Figure 4-5

WARNING: Be sure to set the correct voltage before inserting the power cord connector.



Figure 4-6

Power connector socket with fuse holder on the electronics box



Figure 4-7

Up / Down switch on the electronics box

ATTENTION: With patients in wheelchairs, care must be taken when lowering the table that the table plate does not come into contact with their legs.

4.3 Installation

4.3.1 Instrument Table

The instrument table is delivered in a separate package. Utilize the instructions included with the table to put the table together and take care to select the correct voltage before connecting the power cord.

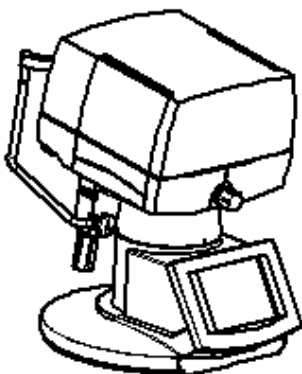
4.3.2 OCTOPUS 301/311

Handle the instrument using both lower housing halves to lift it out of the packing. Two ribbed grips hinder sideways slipping.

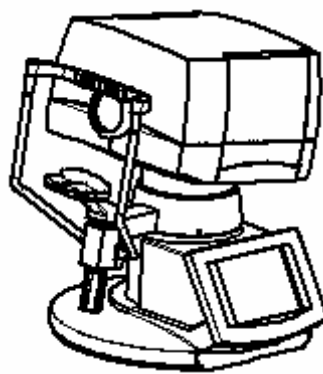
ATTENTION: Do not use the forehead rest of the perimeter as a carrying handle. This plastic part is not adequate for the weight and can be thus broken.

Since the OCTOPUS 301/311 works without a cupola, a fully darkened room is not required. In order, though, to make the examination conditions pleasant for the patient and for obtaining reliable results, the instrument is to be placed in the room so that no direct light falls on the instrument or the patient.

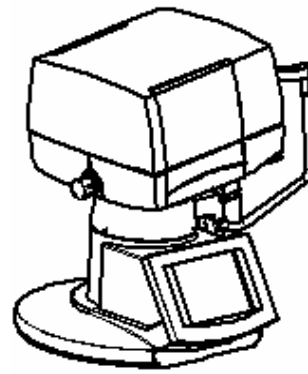
The positioning between the patient and the operator or the operating panel can be so chosen that the room conditions are optimally used.



The patient sits across from the operator

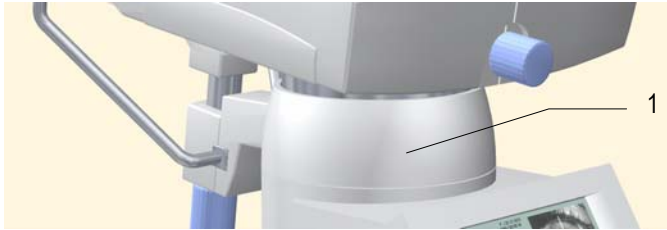


The patient sits on the operator's left



The patient sits on the operator's right

Figure 4-8



1 Headrest holder with 3 Allen screws

Figure 4-9

- Loosen the three Allen head screws roughly 2 turns counterclockwise on the perimeter of the headrest holder (Allen wrench is included with the accessories) and turn the headrest together with the optical unit into the desired position. Tighten the three Allen head screws again. A complete rotation around the column is blocked by a built in limit.
- Place the instrument on the table so that the opening of the table foot and the headrest are in the same direction.
- Connect the patient response button to the connector located on the support of the headrest.

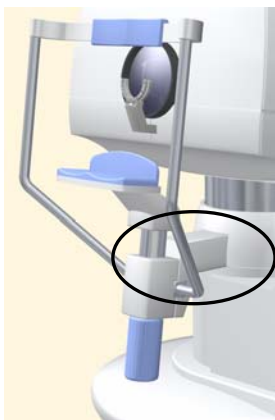
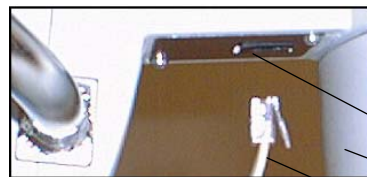


Figure 4-10

The connector housing for the patient response button is accessible from below on the headrest support.. The catches on the patient response button connector are oriented in the direction of the instrument column.

ATTENTION: Besides the patient response button no other cable should be attached to the RJ11 connector.



- Headrest support with connector
- Instrument column
- Connector with catches

- Stick the connector plug so far into the connector housing that the catches audibly click. To remove the patient response button, press the catches in the direction of the headrest and pull out the cable downwards.
- If the examination data are to be transmitted to a PC, connect the OCTOPUS 301/311 and the PC with the serial connection cable or integrate the perimeter into your Local Area Network.
- Plug the power cord in. The built in power unit works with the voltage specified in chapter 12.1 'Technical Data'. A change of voltage on the instrument is not required. If an instrument table was delivered with the unit, the OCTOPUS 301/311 can be connected using the power socket in the electronics box of the instrument table.

4.4 Operating

The operation of the instrument occurs with clear text; elements are used which are known from the PC world such as:

- | | |
|---------------------------|--|
| – Dialog box | → Dialog window, divided into logical items |
| – Entry boxes | → Enter information using the keyboard or change by incrementing or decrementing |
| – List boxes | → Select parameter from a displayed list |
| – Buttons (on/off/toggle) | → Options activated by pressing a button |
| – Buttons (with symbols) | → Initiate functions |

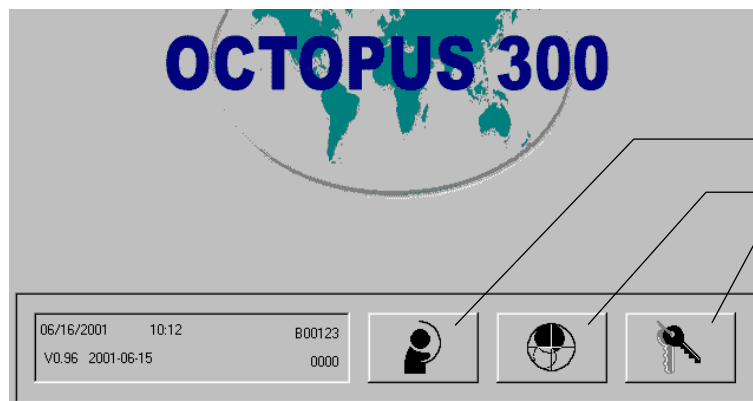


Figure 4-11

After switching on the perimeter the main screen appears on the monitor with the symbols for

Prepare and perform an examination

Analyze examination results

Settings, setup

and an information window with

- Current date and time
- Serial no. of the instrument
- Software version, link date
- Accessible options

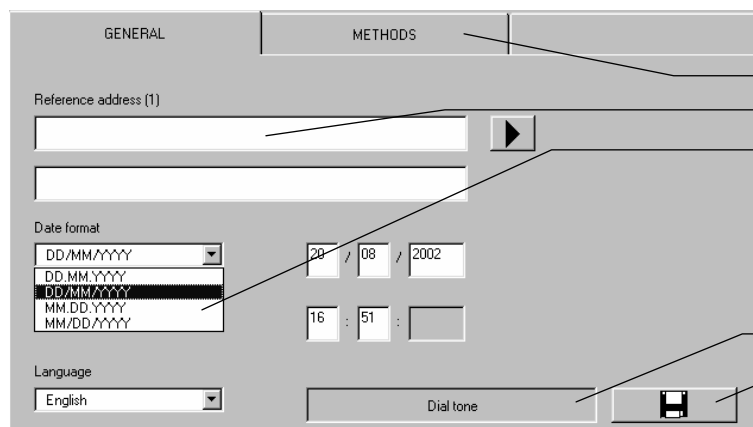


Figure 4-12 Dialog box

Tab

Entry box

List box

Buttons (on/off/toogle)

Button

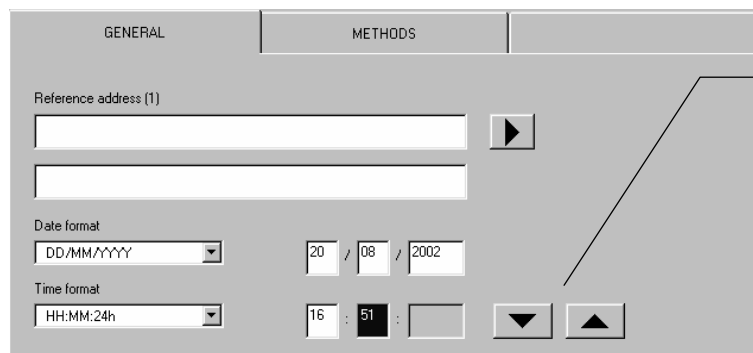


Figure 4-13 Entry fields

After an entry box has been activated buttons are presented which can be used to increment or decrement the preset values, or an alphanumeric keyboard is displayed which can be used to enter the required information.

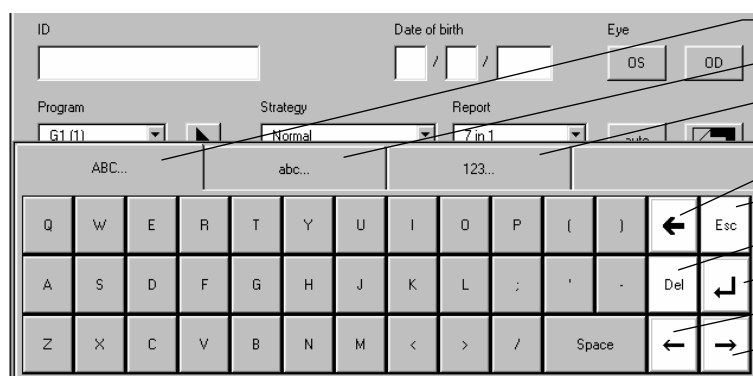


Figure 4-14 Keyboard

Tab with capital letters

Tab with small letters

Tab with numbers and special symbols

Delete character on the cursor's left

Close keyboard

Delete character on the cursor's right

ENTER key

Move cursor left

Move cursor right

5 CARE AND MAINTENANCE

WARNING: Housing sections of the perimeter may only be removed by trained persons.
The on/off switch does not separate the perimeter from the power. Before the housing section is removed, the instrument must be disconnected from the power by detaching the power cord.
Repairs may only be made by trained and authorized technicians. Through improper repairs considerable danger for patients and operators can arise.
If a part must be replaced, only original parts as supplied by HAAG-STREIT or your representative may be installed.
Guarantee coverage will be denied if instructions in the User's Manual are ignored.

The OCTOPUS 301/311 requires minimal care in order to perform for a long time to your complete satisfaction. We recommend that you have the perimeter overhauled periodically by a service technician. HAAG-STREIT or your local representative will be happy to provide additional details.

5.1 Cleaning

It suffices to dust the instrument periodically with a soft cloth. More obstinate dirt particles can be removed using a soft cloth dampened slightly with water or alcohol.

ATTENTION: Avoid making the instrument wet and never use any solvents.

A dust cover is included with the accessories of the OCTOPUS 301/311. Cover the instrument when the room is cleaned or when it will not be used for a longer time.

5.1.1 Patient Response Button, Chin and Headrest, Turning Knobs and Eye Occluder

All of these parts are made from plastic which can be cleaned with no problems. In order to keep them hygienically clean, they should be cleaned periodically with a cloth or cotton dampened with alcohol.

5.1.2 Ocular

Finger prints and dust can be removed with a moist soft cloth.

5.1.3 Monitor Screen, Touch Module

Finger prints and dust can be removed with a moist soft cloth.

5.2 Light Sources

In contrast to other perimeters in the OCTOPUS 301/311 LEDs are employed as light sources for the background illumination and the stimulus. These almost never burn out. Should it ever prove necessary to replace one of the LEDs, please contact the customer service of your representative.

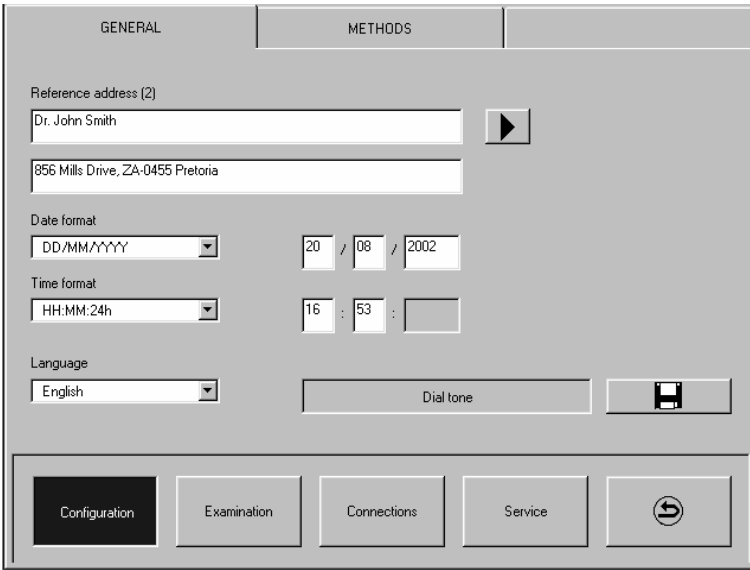
6 CONFIGURATION, SETUP

In order to perform examinations with the OCTOPUS 301/311 and analyze the results, only a few items have to be entered or manipulations made when configuration and setup has been correctly carried out. It will prove valuable to study the following chapter in order to work with the instrument efficiently.

Basically

- The options are selected which are shown in the window of a dialog box.
- A function is activated when the associated button is pressed.
- For alphanumeric information, a keyboard is displayed automatically or the values are changed by incrementing or decrementing.
- Before the box is closed the selected changes must be stored.

6.1 General Basic Settings



Basic settings

- Date, date format
- Time, time format
- User language
- Dial tone

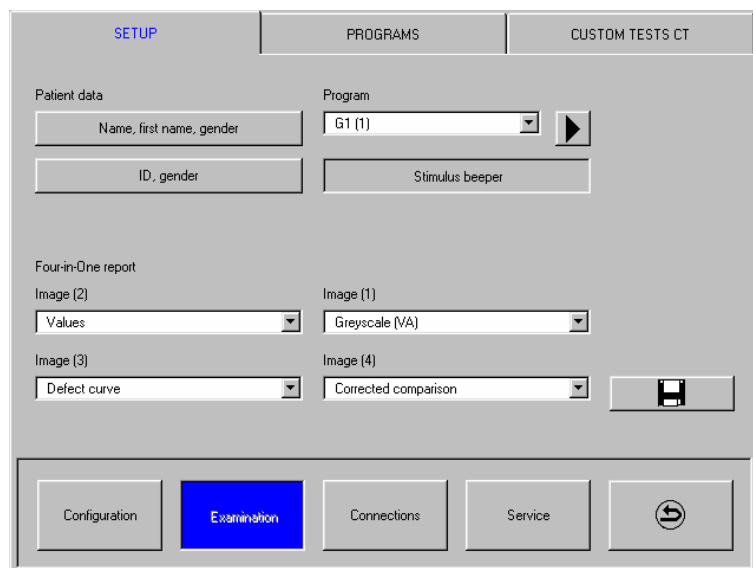
Figure 6-1: Setup – Configuration – General

Reference address(es)	Address, information on printout	Input fields for up to six addresses or information sequences. The one selected during examination preparation is printed in the printout header. After clicking to the input field the keyboard is automatically displayed. After clicking on ► the next input field is presented (save previous input first).
Date format	Sequence of the date entry and display	The entry sequence of the current date and the date of birth of the patient are set with 'Day – Month – Year' or 'Month – Day – Year'.
Actual date	Current date	Setting the current date (sequence according to the 'Date format').
Time format	Display type of the current time and the time of the examination	Specifying whether the current time is to be entered and displayed in 12- or 24-hour mode.
Actual time	Current time	Setting the current time (according to the 'Time format').
Language	User language	5 languages (English, German, French, Italian, and Spanish) are selectable. The selected language is adopted after leaving the setup. Using a software tool on the PC the text in further not implemented user languages can be translated (separate description).

Dial tone	Confirmation sound for keyed entries	For activating or deactivating a sound as confirmation when a button is pressed.
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Changes must be stored by pressing  before leaving the dialog box.

6.2 Presettings for Preparing an Examination

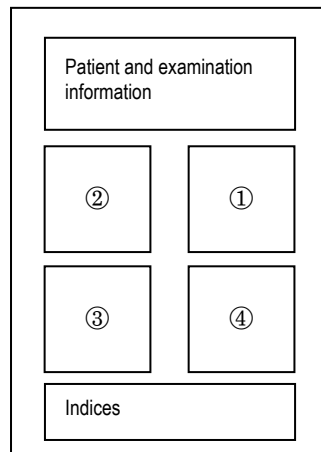


Presettings

- Additional patient information when preparing an examination
- Desired examination program
- Layout of the Four-in-One printout

Figure 6-2: Setup – Examination – Setup

Name, first name, gender	Patient surname, given name and gender	For determining which parameters must be entered for identifying the patient.
ID, gender	Patient ID number and gender	
Every combination of these two buttons is possible.		
Program	Desired examination program	For determining which program should be presented as standard when preparing an examination. Per program three variants (1), (2) and (3) can be selected. Choose the program from the list first and click on ► in order to change the variant number (the variants are defined in chapter 6.3 'Defining the Variants of the Standard Examination Program').
Stimulus beeper	Sound which accompanies stimulus presentation	For turning the stimulus presentation sound on or off.

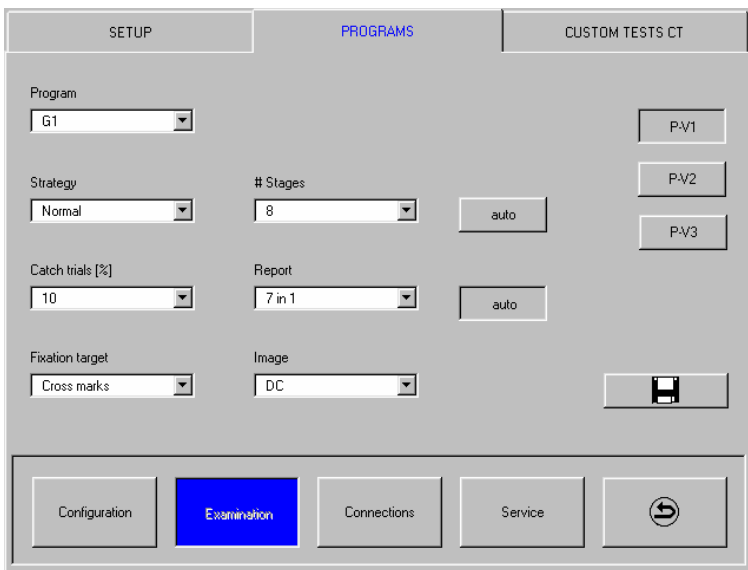
**Four-in-One report
(Option)**
Images on the Four-in-One printout


For specifying where the types of display should be shown on the Four-in-One printout. Every combination of the four selectable images is possible. If the results of a program are printed for which one or more images are not supported, the corresponding fields remain empty.

Changes must be stored by pressing  before leaving the dialog box.

6.3 Defining the Variants of the Standard Examination Programs

The G1, 32, M2, ST and LVC examination programs are built into the OCTOPUS 301/311. For each of these programs three variants (1), (2) and (3) can be defined and stored as buttons P-V1, P-V2 and P-V3.


Program variants

- Parameters for standard examination programs

Figure 6-3: Setup – Examination – Programs

Procedure

- Select the examination program from which the variants should be formed, from the 'Program' list box.
- Select the variant which is to be changed by pressing one of the P-V1 ... P-V3 buttons.
- Define the variants by assigning the various parameters.
- Store the parameters.
- Repeat the procedure for all the desired programs and variants.

**Strategy
(TOP optional)**

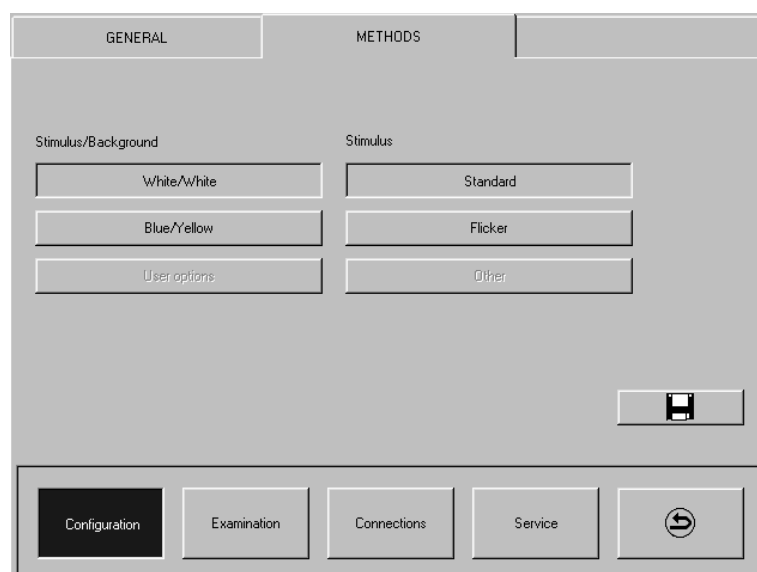
Program-dependent examination strategy

Assign the selected examination program an examination strategy. The available possibilities depend on the examination program.

# Stages auto (# Stages)	Number of examination stages	Specify the number of examination stages which should be gone through. If the 'auto' button on the side is pressed, the program will end once the stages have been gone through. If it is not pressed, the '# Stages' selection has no meaning.
Catch trials [%]	Number of catch trials in [%]	Set the number of catch trials as a percentage [%] which should be presented during the examination (same number of positive and negative catch trials).
Fixation target	Fixation symbol	Set the fixation target which is displayed for the patient during the examination. If the selected fixation target collides with a test location, another target is displayed during the corresponding stage.
Image	Desired type of display	Select the default display which is to be shown on the monitor. The possibilities depend on the selected examination program (see Table 9-1).
Report auto (Report)	Desired printout	Select the default display which is to be printed. The possibilities depend on the selected examination program (see Table 9-1). If the 'auto' button at the side is pressed, the selected printout will be printed automatically at the end of the examination. If the button has not been pressed, the 'Report' selection has no meaning.

Store the definitions by pressing  before leaving the dialog box or selecting a further variant.

6.4 Selecting the Perimetry Method



Perimetry methods

- Stimulus and background colors
- Stimulus and perimetry method

Figure 6-4: Setup – Configuration – Methods

Stimulus/Background	Stimulus and background colors	In the OCTOPUS 301 white/white perimetry is used. In the OCTOPUS 311 blue/yellow is available in addition and can be selected and user-defined filters can be utilized. The required entries for calibrating the perimeter are described in chapter 6.6 "
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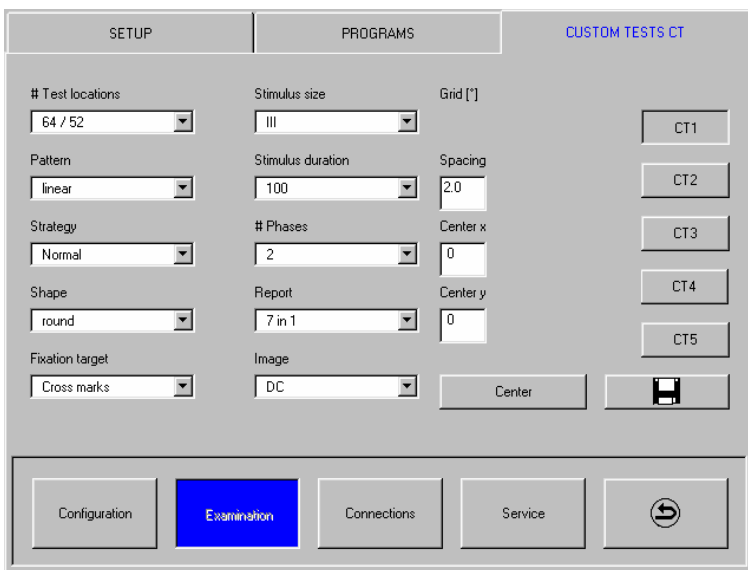
Stimulus	Perimetry method	In the OCTOPUS 301 standard perimetry is used (normal rectangular stimulus for specified duration). In the OCTOPUS 311 additional options are available (see separate description).
-----------------	------------------	---

Changes must be stored by pressing  before leaving the dialog box.

6.5 Defining user-defined Tests

In the OCTOPUS 301/311 five examination programs (CT1 ... CT5) can be defined by the user and stored (optional in the OCTOPUS 301).

For programs in which the grid center does not lie at the zero point ($x / y = 0 / 0$) one must insure that the programs are defined for examining the right eye. The conversion of the test location coordinates takes place then automatically when a left eye is examined.



CT Programs

- Parameters for user definable examination programs

Figure 6-5: Setup – Examination – Custom tests CT

Procedure

- Select the CT program which is to be defined by pressing the associated CT1 ... CT5 button.
- Define the program by assigning the various parameters.
Some parameters depend on each other or on the examination strategy. Not all combinations are thus selectable (see Table 6-1).
- Store the definitions by pressing  before leaving the dialog box or choosing a further CT program.

# Test locations	Number of test locations	Specify the number of test locations which are to be examined. The number in front of the slash (/) defines the number for a square test area, the number after the slash (/) the number for a round one.
Pattern	Distribution of the test locations	Distribution of the test locations linearly or non-linearly over the test area.
Shape	Form of the test area	Square or round test area.
Fixation target	Fixation symbol	Set the fixation target to be displayed for the patient during the examination. Test locations which collide with the fixation target, are eliminated from the program.
Strategy (TOP not available)	Examination strategy	Specify the examination strategy which controls the examination process.

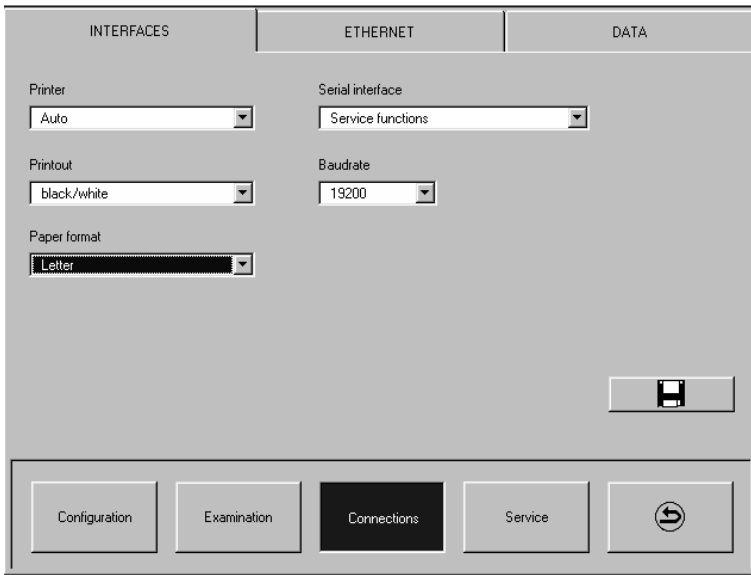
# Phases	Number of examination phases	Define the number of phases which are to be gone through.
Stimulus size	Size of the displayed stimuli	Set the stimulus size according to Goldmann III or V.
Stimulus duration	Duration of the displayed stimuli	Set the duration of the individual stimuli.
Report	Desired printout	Select the default image to be printed out. The possibilities depend on the selected parameters (see Table 9-2).
Image	Desired display	Select the default image which is to be shown on the monitor screen. The possibilities depend on the selected parameters (see Table 9-2).
Spacing	Spacing of the test location grid	Specify the spacing between the individual test locations.
Center x	x coordinate of the test area center	Define the x and y coordinates of the test area center.
Center y	y coordinate of the test area center	
Center	Examine center point of the test area	Specify whether the center point of the test area should be examined or not.

Changes must be stored by pressing  before leaving the dialog box.

Strategy	Pattern	Shape	# Test locations	Spacing	Center x	Center y	Center	Stimulus size	Stimulus duration
- Normal - Dynamic	linear	- square - round	16/12 25/21 36/32 49/45 64/52 81/69 100/76	0.5 .. 6.0 in steps of 0.1° 2.0	0 .. ±55 in steps of 1°	0 .. ±55 in steps of 1°	- on - off	- III - V	100 200
	non linear	round	81/69	0.5 .. 2.6 in steps of 0.1°	0.0	0.0	- on - off	- III - V	100 200
Low Vision	linear	- square - round	16/12 25/21 36/32 49/45 64/52 81/69 100/76	0.5 .. 6.0 in steps of 0.1° 2.0	0 .. ±55 in steps of 1°	0 .. ±55 in steps of 1°	- on - off	V	200 500
	non linear	round	81/69	0.5 .. 2.6 in steps of 0.1°	0.0	0.0	- on - off	V	200 500
2LT (NS) 2LT (DS)	linear	- square - round	16/12 25/21 36/32 49/45 64/52 81/69 100/76	0.5 .. 6.0 in steps of 0.1° 2.0	0 .. ±55 in steps of 1°	0 .. ±55 in steps of 1°	- on - off	III	100
	non linear	round	81/69	0.5 .. 2.6 in steps of 0.1°	0.0	0.0	- on - off	III	100

Table 6-1: Relationships of the CT Program parameters

6.6 Settings for External Connections



External connections

- Installed printer
- Printout (color, black/white)
- Paper format
- Transmission parameters

Figure 6-6: Setup – Connections – Interfaces

Serial interface / Baudrate	Speed of data transmission	Definition of data transmission speed using the serial interface. All baudrates are set to valid default values. If the baudrate is changed for the OCTOPUS 301/311 be sure to have the same baudrate in the PC. Procedure: – Select desired parameter in 'Serial interface' – Select speed of data transmission in 'Baudrate' and save changes.
Printer	Selection of the connected printer	Only printers with USB interface can be connected. Normally the connected printer is identified automatically.
Printout	Black/white or color printout	Black/white or color printouts are available. Be aware that color printouts take more time to be processed and printed compared to black/white printouts.
Paper format	Used paper format	The standard paper formats A4 (Europe) and Letter (USA) can be selected.

Changes must be stored by pressing  before leaving the dialog box.

6.7 Ethernet Interface Settings

The screenshot shows the 'ETHERNET' tab of the 'INTERFACES' dialog. It includes input fields for 'IP (examination data)', 'IP (patient information)', 'Addresses OCTOPUS 311', 'Gateway', and 'Subnet mask'. A numeric keypad is located on the right side of the dialog. The 'Connections' button at the bottom is highlighted.

Ethernet interface settings

- IP addresses of connected PC(s)
- Gateway address(es)
- IP address of OCTOPUS perimeter

Figure 6-7: Setup – Connections – Ethernet

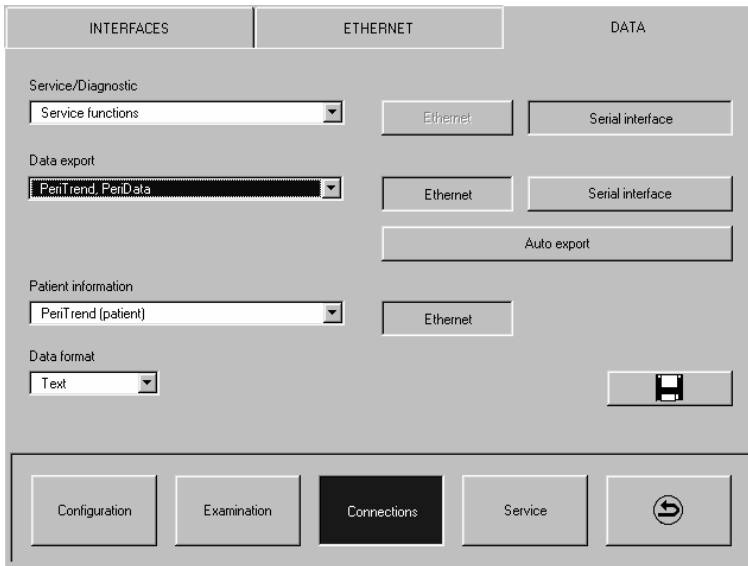
In connection with the integration of an OCTOPUS perimeter into a Local Area Network some specific settings and installations have to be carried out on the server and on the OCTOPUS 301/311 (preferably by an IT specialist). Details are available in a separate description shipped with the required interface board.

IP (examination data)	IP address of LAN server or PC	IP address of the LAN server or a PC integrated in the LAN where the examination data of the OCTOPUS 301/311 have to be exported.
IP (patient information)	IP address of LAN server or PC	IP address of the LAN server or a PC integrated into the LAN where patient information for examination preparation is available (both addresses may be identical).
Gateway	Gateway IP address	IP address of a Gateway.
IP address OCTOPUS 311	IP address OCTOPUS perimeter	IP address of the OCTOPUS 301/311 in the Local Area Network.

After definitions are made and the devices are connected to the LAN the correct communication can be checked by clicking on the 'Ping' button. Correct communication is confirmed by displaying a ☒ sign, if no communication is possible a ☐ sign is displayed.

Changes must be stored by pressing  before leaving the dialog box.

6.8 Settings for Data Communications



Data communication

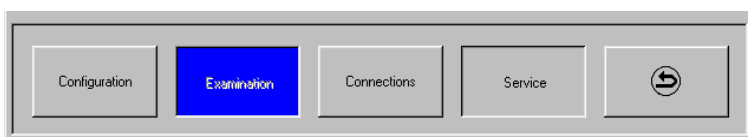
- Selection of a Service/Diagnostic function
- Selection of the analysis program where data have to be exported
- Structure of patient information used to prepare an examination
- Definition of the interface used to communicate with a PC

Figure 6-8: Setup – Connections – Data

Service/Diagnostic	Service and diagnostic functions	Per default this parameter is set to 'Service functions'. 'Service functions' is used to upgrade application software and to modify User texts. To apply these two functions the serial interface is required.
Data export	Analysis program where data have to be exported	Selection of the analysis program where data have to be exported. – For data export to PeriData the serial interface is required. – For data export to PeriTrend Ethernet or serial interface is used. (To use the Ethernet interface the corresponding installation and configuration of the OCTOPUS perimeter and a PC or the LAN server is required).
Patient information Data format	Patient information for the preparation of an examination	Demographics to identify the results of the patient to be examined can be selected from PeriTrend or an EDP system (special PeriTrend or EDP functions required).
Auto export	Automatic data export	Examination results are automatically exported to the connected PC at the end of an examination or after an automatic printout on the OCTOPUS 301/311 if this button is pressed. After transmission the data is deleted from perimeter buffer.

Changes must be stored by pressing  before leaving the dialog box.

6.9 Service Functions



The service functions are described in the 'OCTOPUS 301 Service Manual'.

Figure 6-9: Setup – Service –

7 PERFORMING AN EXAMINATION

Careful examination preparation helps increasing the reliability of the results. The patient should be informed about the examination process so he or she can cooperate optimally.

7.1 Instructing the Patient

Fixation

During the entire examination the patient concentrates on the fixation target which is displayed in the center of the field of view.

Examination Process

At various locations in the field of view stimuli (flashes of light) of a certain duration and intensity are shown. The patient acknowledges that he or she perceives the stimulus by pressings quickly on the patient response button.

Perception of the Stimuli

It is normal that the patient is unable to see many stimuli. The number depends on the selected examination strategy and the condition of the patient's visual field.

Duration of the Examination

The duration of the examination depends on the selected examination program and the examination strategy and can range from roughly 3 to 15 minutes.

Stopping the Examination Process

By closing the eye being examined or holding the patient response button down the patient can stop the examination process.

Stimulus Interval

The time between two successive stimuli varies according to the instrument settings and the patient response speed of the patient. It can range from roughly 1.5 to 4 seconds.

7.2 Trial Lenses

The patient sees the stimuli at infinity and thus his or her eye must be corrected for distance. The spherical lens is put on the patient's side, the cylindrical on the ocular side of the lens holder. For the correct positioning of the cylindrical correction axis the trial lens holder is fitted with marks separated by 10°. The first mark to the above right corresponds to the 0° position. The trial lenses can remain in place during the whole examination. The trial lens holder can be swung out roughly 25° towards the front for changing the trial lenses comfortably.

7.3 Situating the Patient

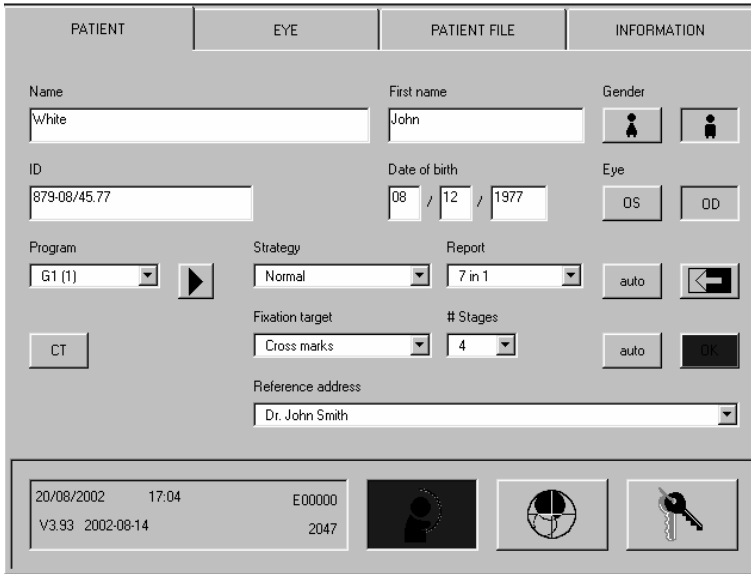
We recommend using a chair in which the back and the seat can be adjusted. Place the chair so that the patient is in as relaxed a posture as possible. An electrically adjustable instrument table (optional) allows the height of the instrument to be fitted to the patient's physical size comfortably.

Cover the eye not being examined with the occluder which is included in the accessories, give him or her the patient response button, and explain its operation.

Adjust the headrest and table height so that the patient can rest his or her chin on the chin rest without having to alter their posture and so that his or her forehead touches the sensors in the forehead rest (right eye = left indentation, left eye = right indentation). The height of the chin rest should be set using the adjustment knob so that the eye of the patient lies even with the inscribed rings on the two columns.

7.4 Preparing an Examination (Standard Program)

Examinations or examination preparation are always accessed via the 'Examine' symbol. Before an examination can begin, a few items must be entered.



Preparing an examination

- Personal patient data
- Program parameters

Chapter 6.2 'Presettings for Preparing an Examination' and chapter 6.3 'Defining the Variants of the Standard Examination Program' show how the presettings can be optimized.

Figure 7-1: Examination – Patient (standard programs)

The information which the system requests depends on the setup (see chapter 6 'Configuration, Setup'). The items which are always required are the patient's date of birth and the eye to be examined.

Name	Patient's name	Enter the patient's surname.
First name	Patient's given name	Enter the patient's given name.
ID	Patient's identification number	Enter the Identification number.
Gender	Patient's gender	Click on the corresponding symbol.
Date of birth	Patient's date of birth	The patient's date of birth must be entered. The sequence of how it is typed 'Day – Month – Year' or 'Month – Day – Year' was defined in the setup (see chapter 6.1 'General Basic Settings').
Eye	Eye to be examined	Click on the eye which is to be examined. This item is absolutely required.
Program	Standard examination program	Select the program to be used for the examination. To select a standard program, do not press the 'CT' button. For each of these programs three variants can be defined (see chapter 6.3 'Defining the Variants of the Standard Examination Programs'). By clicking on ► the next variant will be selected. This button has no function for CT programs.
CT	CT button	If a CT program is to be used see chapter 7.5 'Preparing an Examination (CT Program)' for examination preparation. The 'CT' button is not pressed for standard examination programs.
Strategy (TOP optional)	Examination strategy	Select the strategy which is to be used in the examination.
Report auto (Report)	Desired printout	Select the default image which is to be printed. The possibilities depend on the selected program (see Table 9-1). If the 'auto' button at the side is pressed, the selected printout will be printed automatically at the end of the examination.

Fixation target	Fixation symbol	Set the fixation target which is displayed for the patient during the examination. If the selected fixation target collides with a test location, another target is displayed during the corresponding stage.
# Stages auto (# Stages)	Number of examination stages	Specify the number of examination stages which should be gone through. If the 'auto' button on the side has been pressed, the program will end after the preset stages have been worked through.
Reference address	Address, information on printout	Select reference address to be printed in the header of a printout. After clicking on  the default address is selected (address which is presented in the 'Setup' – 'Configuration' – 'General' window).
	Delete entries, set standard values	When an examination is being prepared, the patient data and the program parameters from the previous examination are offered. After the 'Delete' button is pressed, the patient data is deleted and the program parameters defined in the setup are taken over.

The 'OK' button turns blue when all the required data have been entered. Press 'OK' to start the examination. Examination monitoring and examination procedure are described in chapter 8 'Monitoring an Examination'.

IMPORTANT: The required items can be reduced to a minimum when the setup has been well matched to your needs.

PATIENT	EYE	PATIENT FILE	INFORMATION
Pupil Acuity Sphere Cylinder Axis			
IOP Notes			
Smith John Right eye (OD)			

Examination preparation

- Eye-related data

Figure 7-2: Examination – Eye

Entering the eye-related data is not absolutely necessary. The dialog box can only be selected when the eye to be examined has been selected. All entered information is deleted when the other eye is selected.

Pupil	Pupil size	All information entered here is voluntary and is not checked for plausibility. If data has been entered and the other eye is selected, everything entered up to that point is deleted.
Acuity	Acuity	
Sphere	Spherical refraction correction	After  is pressed (see above) eye-related data is also deleted.
Cylinder	Cylindrical refraction correction	
Axis	Axis of the refraction correction	
IOP	Intra ocular pressure	
Comment	Lines for comments	

As information the surname, given name, date of birth and the examined eye of the patient are shown. Click on the 'Patient' tab to start the examination.

7.5 Preparing an Examination (CT Program)

In order to select a user-defined program, the 'CT' button has to be pressed.

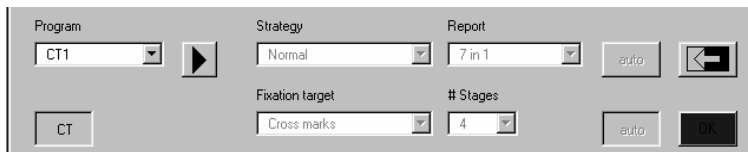


Figure 7-3: Examination – Patient (CT program)

Examination preparation for CT Program

- Program parameters

Enter the personal patient data and the eye-related data. See chapter 7.4 'Preparing an Examination (Standard Program)'.

CT	CT button	If a CT program is to be used, press the 'CT' button and select the program in the 'Program' list box.
Program	CT examination program	Select one of the 5 predefined CT programs in the list box. The ► button has no function for CT programs.
Strategy Report Fixation target	These parameters are displayed for your information. They can only be changed in the setup (see chapter 6.5 'Defining user-defined Tests').	
# Stages auto (Report) auto (# Stages)	No function.	

7.6 Patient File

All interrupted and completed examinations are recorded in the patient file. Interrupted examinations can be resumed again and the personal patient data can be taken over in a new examination from a completed one.

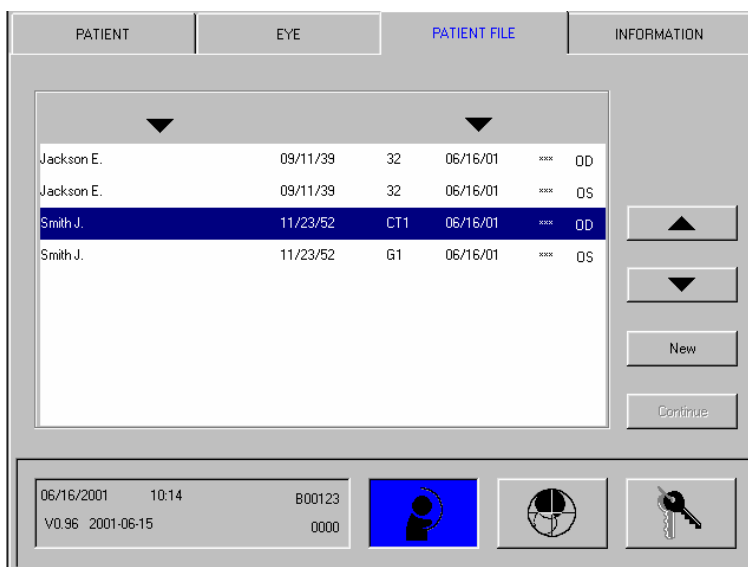


Figure 7-4: Examination – Patient file

Patient file

- Directory of the examinations which have been performed
- Resume interrupted examinations

Examination status
(** interrupted)
(*** completed)

The examination file can contain a maximum of 48 examinations. The message 'Examination buffer full' indicates that results have to be transmitted or deleted before starting a new examination.



Sort file

Sort the list according to patient names or examination date in an increasing or decreasing series.

Patient names: Click the left button

Examination date: Click the right button

	Scroll file forwards / backwards	The patient file can contain a maximum of 48 examinations. Using the two buttons the list can be scrolled forwards or backwards until the desired examination is found.
New	Begin a new examination	When a patient is to be examined whose patient data is already in the list, proceed as follows: – Search for the patient in the list – Highlight the patient – Press the 'New' button ➔ Data will be taken over in the boxes of the 'Preparing an Examination (Standard Program)' screen. All entries can be changed (see chapter 7.4). ➔ Start examination with 'OK'
Continue	Resume an interrupted examination	When an interrupted examination (**) is to be resumed, proceed as follows: – Search for the patient in the list – Highlight the patient – Press the 'Continue' button ➔ Program continues with 'Monitoring an Examination' (see chapter 8). Entries cannot be changed.

7.7 Information

Various program parameters from the selected examination program and the age-corrected normal values are shown in the information window. Parameters cannot be changed here.

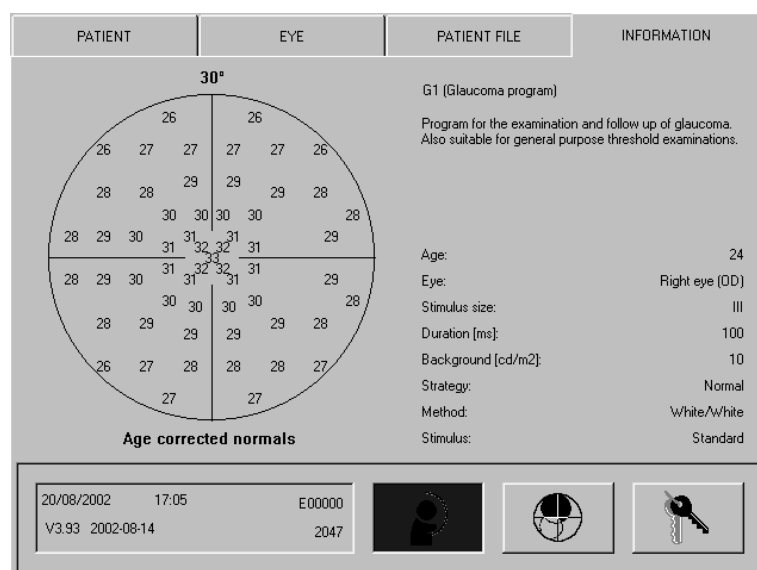


Figure 7-5: Examination – Information

Information from the examination program

- Brief description of the selected examination program
- Parameters of the selected examination program
- Display of the age corrected normal values at the test locations when the standard program parameters were employed in a threshold value program
- If the age of a patient is defined the numbers correspond to the age corrected normals.
- If no age is defined the numbers correspond to the normal values of a 20 years old person.

To specify luminances the two units [asb] and [cd/m²] are used.

Conversion: [asb] divided by π (3.14) = [cd/m²]
[cd/m²] multiplied by π (3.14) = [asb]

8 MONITORING AN EXAMINATION

After the examination preparation has been completed by pressing the 'OK' button the monitoring screen appears. This is the right moment to position the patient at the instrument (see chapter 7.3 'Situating the Patient').

8.1 Fine Positioning, Focusing

The fine positioning of the eye to be examined takes place via the arrow buttons on the Touch module. For larger horizontal movements the optical unit can be turned manually. Position the pupil precisely on the crosshairs and focus the display of the eye with the adjustment knob of the optical unit.

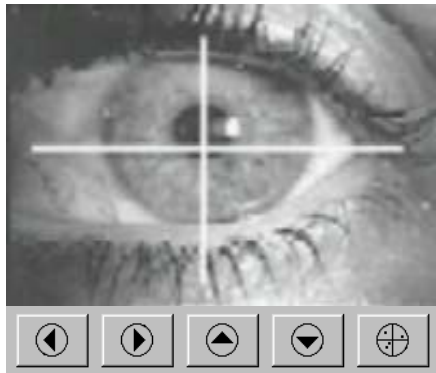


Figure 8-1: Fine positioning

-  Switch to the examined test locations.
-  Switch to the eye being examined.
-   Fine horizontal positioning.
-   Fine vertical positioning.

TIP: Before selecting which button to press, envisage moving the crosshair towards the center of the pupil.

8.2 Command Buttons, Examination Progress



Figure 8-2: Examination progress

- During an examination with a normal or dynamic strategy and standard parameters the DLI (Defect Level Indicator) shows the condition of the visual field. The information is continuously updated.
- The progress indicator shows how far the examination has progressed within the current phase.

The labels and functions of the various command buttons depend on the progress and status of the examination.

Start	After the examination preparation is completed (required data entered, patient instructed and positioned), the actual examination is begun.
Abort	Abort the examination. All of the data collected up to this point will be lost.
Break / Break*	Insert a 'Stop' at the end of the current stage or remove a programmed 'Stop'. Press the 'Break' or 'Break*' buttons respectively. A programmed 'Stop' is displayed with 'Break*'. The examination stops at the end of the stage in which the break has been programmed. The examination can be resumed, stored or aborted. With 'Store' the results obtained up to this point from the completed stages are stored and examination is marked as having been interrupted (**).
Stop	Stop the examination process at some place. The examination can be resumed, stored or aborted. With 'Store' the results obtained up to this point from the completed stages are stored and examination is marked as having been interrupted (**).
Continue	Resume an examination that has been halted by pressing 'Stop'.
Restart	A part of the first stage of an examination is often used to show the procedure to a patient who is new to this type of examination. After stopping within the first stage the examination can be started again without leaving the monitoring mode. All of the data collected up to this point will be lost.

Next	Resume an examination that has stopped after 'Break*' at the end of a stage or Start the next phase of an examination after the end of a phase has been reached and the selected examination program permits one or more further phases.
Save	When the examination program has completed all the test locations, the results are stored automatically. By pressing 'Save' the results from the stages which have been completed up to the point of pressing are stored and marked as being an interrupted examination (**).

8.3 Examination Information

All the displayed information is continuously updated during the examination, as far as the parameters of the selected examination program permit this to be done.

Smith John
OD / G1 / Normal
Questions:
Repetitions:
Pos. catch trials:
Neg. catch trials:
MD [dB]:
LV [dB2]:

Figure 8-3: Examination information

- Surname, given name and date of birth of the patient, eye being examined, selected examination program and examination strategy being employed.
- Number of stimuli that have been presented.
- Number of stimuli that have been repeated.
- Number of presented and falsely answered positive catch trials.
- Number of presented and falsely answered negative catch trials.
- Mean Defect MD (average of the differences between thresholds and age corrected normal values).
- Loss variance LV (indicates the inhomogeneity of the visual field).
- Short term fluctuation SF (only if phase 2 is examined).

8.4 Parameter Changing

All settings remain unchanged and will also be used in the following examinations.

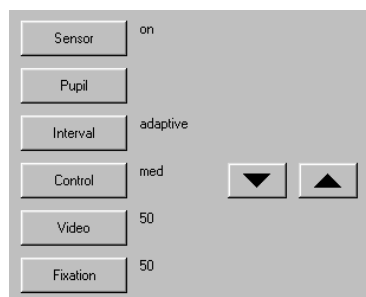


Figure 8-4: Fixation monitoring

- Possibilities for
 - Entering the pupil diameter
 - Setting the sensitivity of fixation monitoring
 - Setting the brightness of the eye image

Procedure

- Press the desired function button (arrow keys are displayed).
- Press the arrow button until the desired value is displayed.
- The arrow buttons disappear when the function button is pressed again (not absolutely necessary).

Sensor	Switch function of headrest sensor on or off respectively	on: User is informed, if the patient is moving back his or her head from the ideal position. Message: Patient moved off: No message is displayed, if the patient is moving back from the ideal position. Independent of this setting, user becomes aware of mismatch between patient's head position and setting in patient preparation.
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Pupil (automatic) Pupil* (manual)	Pupil size of the eye being examined	The pupil diameter can be entered manually or determined by the system. manual: Press the 'Pupil' button and change the starting value by 0.5 mm with each key click. Starting value: — 3mm (if no size has been entered during preparation) — Size which has been entered during preparation — Size which has been determined by the system automatic: The pupil diameter is measured after 10 stimuli each, averaged and displayed. At the end of the examination pupil size is stored in the examination results. Automatic pupil measurement is broken off, if pupil size is entered manually before or during the examination (displayed with Pupil*).
Interval	Set the stimulus interval	For setting the time between two stimulus presentations. Press the 'Interval' button and change the default value by 0.5 seconds with each key click or set interval to adaptive. fix: Fixed time between 1.5 ... 4 seconds. adaptive: The time interval is matched automatically to the response behavior (reaction time) of the patient.
Control	Sensitivity of the fixation monitoring	Press the 'Control' button and change the parameter to the desired value. off: No automatic fixation monitoring. min: Only lid close detection. Deviations of the pupil from the ideal position are not checked. med: Medium sensitivity of the fixation monitoring. max: Maximum sensitivity of the fixation monitoring. auto: Automatic fine positioning (option) is activated.
Video	Brightness of the displayed eye	Press the 'Video' button and change the parameter until the desired brightness is achieved.
Fixation	Brightness of the fixation target	Press the 'Fixation' button and change the parameter until the desired brightness is achieved.

8.5 Continuing an interrupted Examination

Interrupted examinations can be restarted and resumed. The procedure is described in chapter 7.6 'Patient File'.

9 ANALYSIS OF EXAMINATION RESULTS

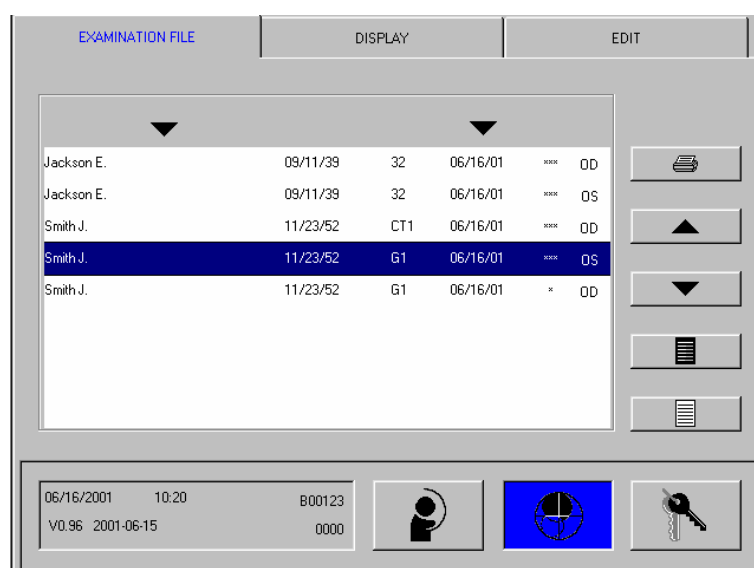
The analysis of the examination results consists of:

- Displaying results on the monitor
- Printing results
- Transmitting results to evaluation software on a PC
- Changing certain data
- Deleting results

The functions are always accessed via the 'Analysis' symbol and the examinations are selected from the examination file.

9.1 Examination File

The desired examinations are selected by clicking on the corresponding line in the examination list. With repeated clicking the selection can be cancelled again. Various functions permit multiple selections.



Examination file

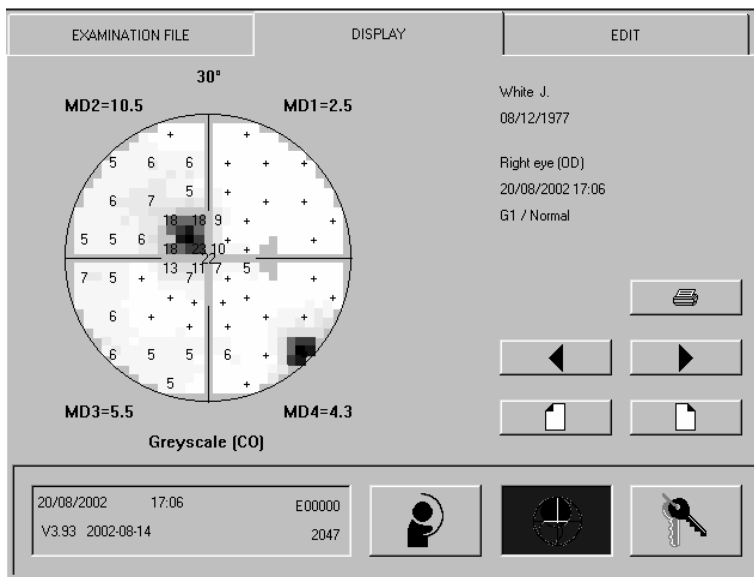
- List of the completed or interrupted examinations
- Table of contents consisting of
 - Name, ID number
 - Date of birth
 - Examination program
 - Examination date
 - Examined eye
 - Examination status
(** interrupted)
(*** completed)

Figure 9-1: Processing – Examination file

	Sort file	Sort the list according to patient names or examination date in an increasing or decreasing series. Patient names: Click the left button Examination date: Click the right button
	Print results	The 'Print' function is invoked directly without a preceding display of the results on the monitor screen.
	Scroll file forwards / backwards	The examination file can contain a maximum of 48 examinations. Using the two buttons the list can be scrolled forwards or backwards until the desired examination is found.
	Select all examinations	Highlight all the examinations in the examination file.
	Cancel the selection	Cancel the selections in the examination file.

9.2 Displaying the Results

Select examination(s) in the examination file and press the 'Display' tab. The type of image which has been defined in setup (see chapter 6.3 'Defining the Variants of the Standard Examination Program') will be displayed on the monitor.



Images on monitor

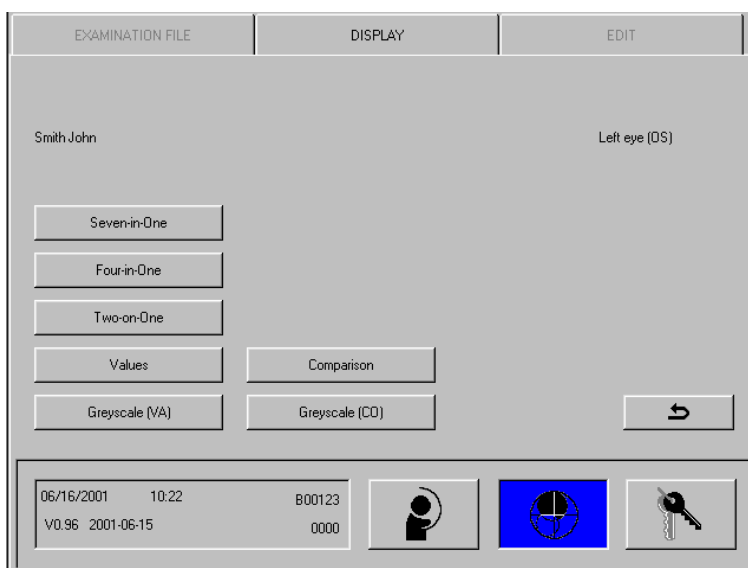
- Types of images depend on the selected examination program

Figure 9-2: Processing – Display

	Scroll through the various images	Display further image when the selected examination permits multiple images.
	Select previous / next examination	Display image of a further examination when multiple examinations have been selected.
	Activate the 'Printer' menu	Invoke printing. The function is only available when a single examination has been selected.

9.3 Printing the Results

Select one examination in the examination file. Access to the 'Printer' menu is available by pressing the  symbol or via the 'Display' tab.



Printing the results

- Direct from the examination file
- or
- After displaying the results on the monitor

Figure 9-3: Processing – Display – Print

The possible images depend on the examination programs which have been performed or the selected examination parameters. Tables 9-1 and 9-2 show the various possibilities.

Program	Image	Report
G1	- Defect curve - Comparison - Greyscale (CO) - Values - Greyscale (VA) - Indices	- Comparison - Greyscale (CO) - Values - Greyscale (VA) - Four-in-One - Seven-in-One
M2	- Defect curve - Comparison - Greyscale (CO) - Values - Greyscale (VA) - Indices	- Comparison - Greyscale (CO) - Values - Greyscale (VA) - Four-in-One - Seven-in-One
32	- Defect curve - Comparison - Greyscale (CO) - Values - Greyscale (VA) - Indices	- Comparison - Greyscale (CO) - Values - Greyscale (VA) - Four-in-One - Seven-in-One
ST	- Symbols/CO - Symbols/VA	- Symbols/CO - Symbols/VA
LVC	- Values - Greyscale (VA)	- Values - Greyscale (VA)

Table 9-1: Images (Standard programs)

Program	Strategy	Stimulus size	Stimulus duration	Image	Report
CT programs	Normal	III	100	- Defect curve - Comparison - Greyscale (CO) - Values - Greyscale (VA) - Indices	- Comparison - Greyscale (CO) - Values - Greyscale (VA) - Four-in-One - Seven-in-One
		- III - V - V	200 100 200	- Values - Greyscale (VA)	- Values - Greyscale (VA)
		III	100	- Defect curve - Comparison - Greyscale (CO) - Values - Greyscale (VA) - Indices	- Comparison - Greyscale (CO) - Values - Greyscale (VA) - Four-in-One - Seven-in-One
	Dynamic	- III - V - V	200 100 200	- Values - Greyscale (VA)	- Values - Greyscale (VA)
		- V - V	200 500	- Values - Greyscale (VA)	- Values - Greyscale (VA)
	Low Vision	III	100	- Symbols/CO - Symbols/VA	- Symbols/CO - Symbols/VA
	2LT (NS)	III	100	- Symbols/CO - Symbols/VA	- Symbols/CO - Symbols/VA
	2LT (DS)	III	100	- Symbols/CO - Symbols/VA	- Symbols/CO - Symbols/VA

Table 9-2: Images (CT programs)

9.4 Transmitting the Results

The examination results can be transmitted to a PC with the corresponding analysis software for data storage and analysis.

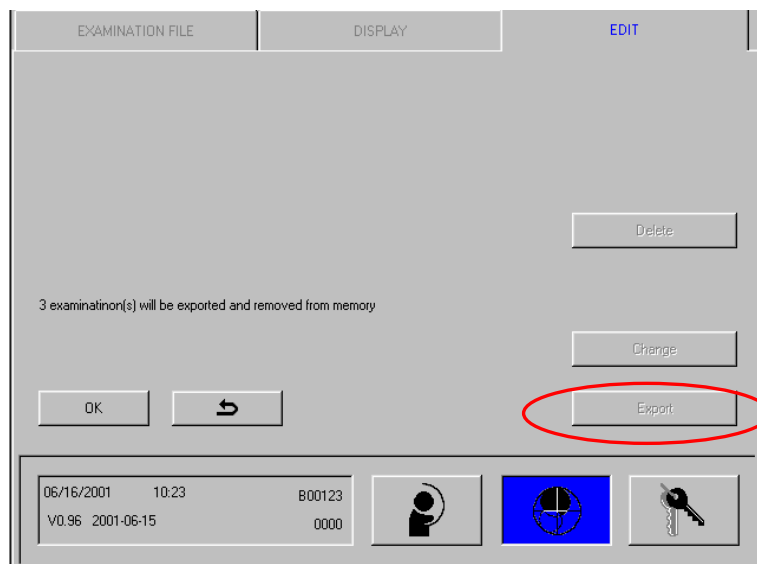
Required are

- Personal Computer
- 'PeriTrend' data storage and analysis software
- Data transmission cable IZ no. 4-0571-9250 or standard RJ45 LAN cable

9.4.1 Preparation

- PC, data transmission and analysis software is installed (the reader is referred to the 'PeriTrend' User's Manual for details).
- Connect the serial interface of the PC and the OCTOPUS 301/311 (connector panel) with the data transmission cable, fasten connector screws or integrate the OCTOPUS 301/311 into your Local Area Network.
- Setup the parameters of the OCTOPUS 301/311 correctly (see chapter 6.6 'Settings for External Connection').

Select examination(s) in the examination file and press on the 'Edit' tab and the 'Export' button. For your information the number of selected examinations is shown and the real transmission procedure must be started by pressing 'OK'. Following a successful transmission the results are deleted from the memory. The procedure can not be rescinded.



Transmitting the results

- Transmit examination results to a connected PC and delete them from the memory
- A data storage and analysis software must be present in the PC (e.g. 'PeriTrend')

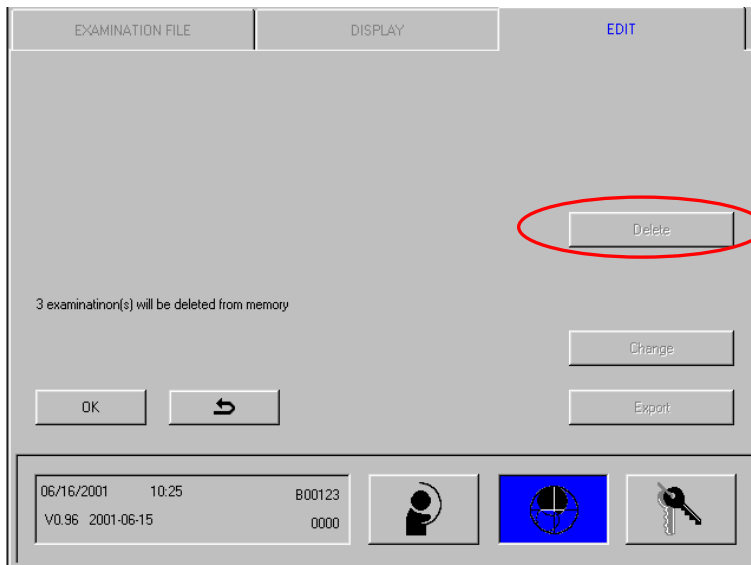
Figure 9-4: Processing – Edit – Export

Export	Invoke the 'Export' function.
OK	Start the transmission and deletion process.

The highlighted results will not be transmitted when the dialog box is closed by pressing the  icon. The data remain unchanged in the OCTOPUS 301/311 memory.

9.5 Deleting Results

Select examination(s) in the examination file and press on the 'Edit' tab and the 'Delete' button. For your information the number of selected examinations is shown and the real deletion procedure must be started by pressing 'OK'. The procedure can not be rescinded.



Deleting results

- Delete examination results irretrievably from the data memory

Figure 9-5: Processing – Edit – Delete

Delete	Invoke the 'Delete' function.
OK	Start the deletion process.

The highlighted results will not be deleted when the dialog box is closed by pressing the  icon. The data remain unchanged in the OCTOPUS 301/311 memory.

9.6 Changing Patient Data

Select one examination in the examination file and press on the 'Edit' tab and the 'Change' button. As when preparing an examination there exists a dialog box with personal patient data and a further one with eye-related data.

Corrections are possible for

- personal patient data
- eye-related data

Corrections are not possible for

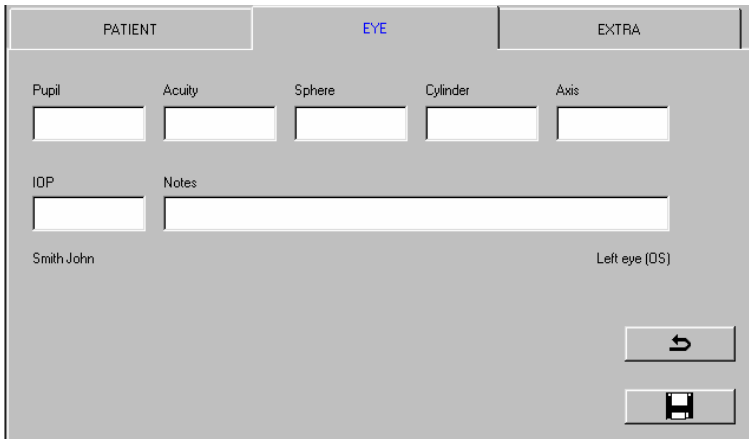
- program-specific data
- the examined eye

06/16/2001	10:26	B00123
V0.96	2001-06-15	0000

Changing patient data

- Altering and augmenting personal patient data

Figure 9-6: Processing – Edit – Change – Patient

**Changing eye-related data**

- Altering and augmenting eye-related data

Figure 9-7: Processing – Edit – Change – Eye

Before leaving the dialog box, changes must be stored by pressing .

Changes are not stored if the dialog box is closed by pressing  in which case the former values remain unchanged.

10 AUXILIARY FUNCTIONS

10.1 Releasing Program Options

Some of the functions of the OCTOPUS 301/311 are offered as options and are not accessible in the basic version of the software. Basically all the functions are present in the software, but some can only be made accessible with a code. This code is delivered by HAAG-STREIT and is then entered by the customer into the instrument. Information about such additional functions can be obtained directly from HAAG-STREIT or from your representative.

10.1.1 Procedure

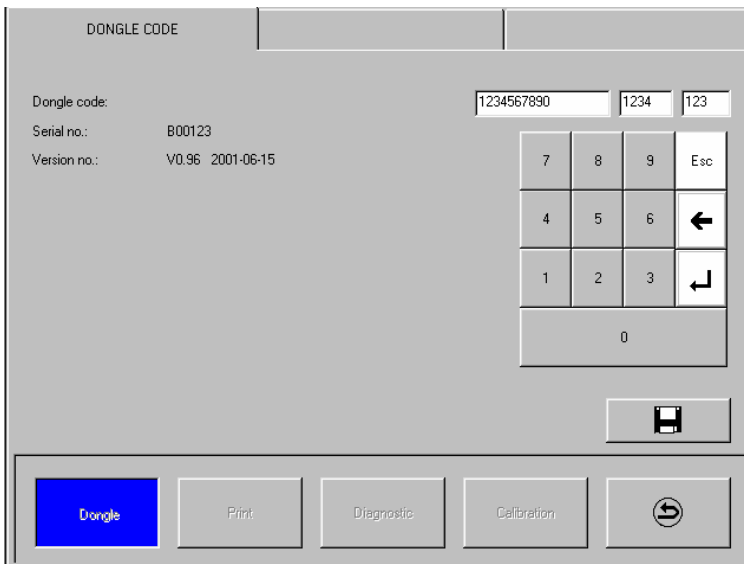


Figure 10-1: Setup – Service – Dongle

Dongle codes

- Read out software master data
 - Actual dongle code
 - Serial no.
 - Software version
- Enter new dongle code. The keyboard is only released, when the serial number of the instrument is stored in the memory.

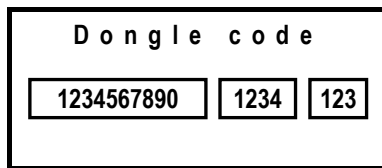
To print out the complete instrument information see chapter 10.2 '*Instrument Information*'.

Procedure to make additional functions accessible in the perimeter.

IMPORTANT: The 'Dongle code' function is only used, when additional program options have been purchased. To avoid free access and faulty manipulations the function is protected. The 'Dongle' button is only released after the two headrest sensors are pressed at the same time.

Customer	– Sends the serial no., software version and the complete dongle code to HAAG-STREIT or the representative and orders the desired supplementary function(s).
HAAG-STREIT	– Based on the serial no. and the present and ordered option(s), the new dongle code is computed and given to the customer.
Customer	– Enters the complete new dongle code into the OCTOPUS 301/311. ◦ Open dongle code tab ◦ Click on 'Dongle code' entry field (numerical keyboard will be displayed) ◦ Enter complete dongle code into the three entry fields ◦ Close keyboard with 'Esc' ◦ Save new dongle code by clicking on  Before saving the parameters are verified by the system. A faulty dongle code will not be saved. The message 'Dongle Code not accepted' is displayed on the screen. Delete wrong code and enter it the correct way.
OCTOPUS 301/311	– The new additional functions are accessed via the graphical user interface.

10.1.2 Entering the Dongle Code



The complete dongle code consists of a multi-digit three part series of numbers (see example on the left). Entering the code is done via 'Setup' – 'Service' – 'Dongle' (Figure 10-1). You need to click 'Dongle' while pressing both forehead support sensors.

IMPORTANT: For safety reasons the 'Dongle' menu will only become active when the two sensors on the forehead support are pushed in until you clicked on the 'Dongle' button. Then you may release the sensors. The additional functions are only made accessible when the dongle code is entered without any mistakes into the instrument it was created for.

10.1.3 The Results of Code Mistakes

Every dongle code is unique and only valid for a specific instrument. Mistakes made while entering it or the entering of it into the false instrument (false serial no.) have the consequence that only the basis functions are then accessible. Changing to the old code is possible at all times.

10.2 Instrument Information

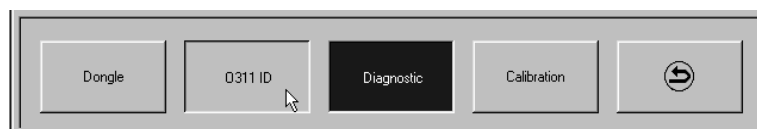


Figure 10-2: Setup – Service – O311 ID

Instrument information

- The complete instrument information can be printed out via 'Setup' – 'Service' – 'O311 ID'.
- The complete Setup information can be printed out via 'Setup' – 'Service' – 'Diagnostic' – 'Printer/Protocols'.

10.3 Touch Screen Calibration

Two ways to calibrate the touch screen are available. It is of course wise to try to carry out calibration by using the built-in service function (refer to section b)). If access to this screen is not possible, start calibration following the procedure in section a).

a) Touch screen calibration with hidden function

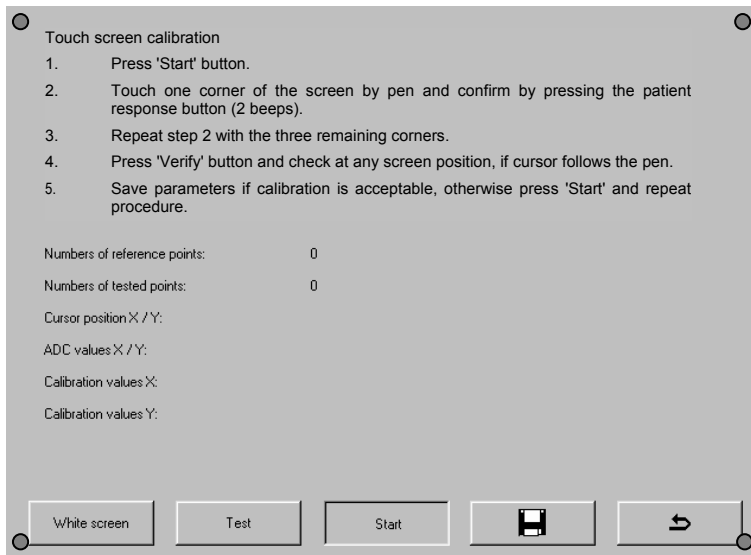


Procedure

- Switch perimeter off and on again and wait for the main screen.
- Press patient response button and headrest sensors simultaneously and wait for confirmation (3 beeps).
- Touch one corner of the screen by pen and confirm by pressing the patient response button (2 beeps).
- Repeat this step with the 3 remaining corners.
- Enter service function, repeat calibration and save parameters (refer to section b)).

b) Touch screen calibration with service function (normal case)

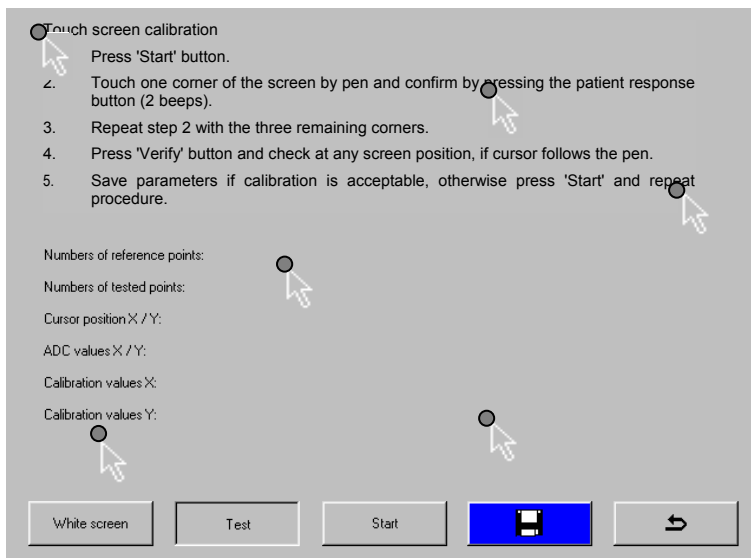
Start calibration screen by pressing SETUP – SERVICE – DIAGNOSTIC – SERVICE/DIAGNOSTIC – TOUCH SCREEN CALIBRATION.



Procedure

- 1) Press 'Start' button.
- 2) Touch one corner of the screen by pen and confirm by pressing the patient response button (2 beeps).
- 3) Repeat step 2 with the three remaining corners.

Figure 10-3: Touch screen calibration



- 4) Press 'Verify' button and check at any screen position, if cursor follows the pen.
- 5) Save parameters if calibration is acceptable, otherwise press 'Start' and repeat procedure.

Figure 10-4: Verification of calibration

11 SYSTEM MESSAGES

Two kinds of system messages are distinguished:

Messages

- The instrument performs a function which takes a certain amount of time. The message disappears automatically when the function has completed its action.
- The instrument is unable to perform a function due to the reason which is shown. The message disappears automatically when the problem has been solved.

Errors

- The instrument is unable to perform a function and the message is deleted by operator response. The problem must be resolved by the operator or, if necessary, by a service technician.

11.1 Messages

Message no.	Message text	
401	Close ocular for adjustment	
402	Dim room light for examination	
403	Dim room light for recheck	
410	Dongle code not accepted	
411	Parameters not accepted	
412	Serial number missing	
413	No modification of serial number	
420	Examination buffer full	
421	Calibration buffer full	
430	Function not supported	
901	Parameter adjustment	
902	Parameter recheck	
910	Select other eye	
911	Patient rests	
912	Position patient correctly	
913	Set trial lenses if required	
914	Patient moved	
915	Fixation loss	
930 - 931	Command in progress	
960	Incorrect settings, not saved	
961	Restart to activate Ethernet	

11.2 Errors

Error no.	Error text	
1 - 69	General OS error 1 - 69	
70 – 149	General examination error 70 - 149	
150	Position not adjusted yet	
151	No W/W parameters	
152	Brightness not adjusted yet	
153	Stimulus not detected	
154	Stimulus fine adjustment	
155	Stimulus center adjustment	
156	Stimulus not on sensor center	
157	No W/W parameters	
158	DAC control timeout	
159	No user parameters	
160	Examintion parameter out of range	
162	No background light	

Error no.	Error text	
163	No light on BG sensor	
164	No light on S sensor	
165	Stimulus intensity recheck	
166	Background intensity recheck	
167	Reference position lost	
168	Wrong stimulus positions	
170	No B/Y parameters	
171	Stimulus intensity too low	
172	Background intensity too low	
173	0dB stimulus adjustment range	
174	20dB stimulus adjustment range	
175	Background adjustment range	
176	0dB stimulus out of tolerance	
177	20dB stimulus out of tolerance	
178	Background out of tolerance	
179	0dB stimulus adjustment timeout	
180	Too bright for light adjustment	
181	Too bright for position recheck	
182	Stimulus projector timeout	
183	Limit switch(es) not reached	
184	Limit switch(es) pressed	
185	Limit switch(es) detected	
186	Upper limit switch not reached	
187	Bottom limit switch not reached	
188	Left limit switch not reached	
189	Right limit switch not reached	
190	Upper limit switch pressed	
191	Bottom limit switch pressed	
192	Left limit switch pressed	
193	Right limit switch pressed	
194	Upper limit switch detected	
195	Bottom limit switch detected	
196	Left limit switch detected	
197	Right limit switch detected	
198	20dB stimulus adjustment timeout	
199	Background adjustment timeout	
200	No response from PC	
201	PC not ready	
202	Transmission error	
203	Receiver error	
215	Ethernet setup not valid	
216	No response from server	
217	Ethernet transmission error	
218	Ethernet receiver error	
231	Battery low	
232	USB power failed	
233	SIM flash checksum	
234	Boot flash checksum	
235	Calibration flash checksum	
236	Memory error	
237	Video RAM error	
238	Battery buffer	
239	Setup parameters lost	
240	Examinations lost	
241	Sensor board connection	
242	Interface board connection	
243	Fixation board connection	

Error no.	Error text	
244	Limit switch connection	
245	Battery buffer cleared	
246	Mainboard does not support B/Y	
247	Background does not support B/Y	
251	Stimulus size relation	
252	Stimulus DAC error	
253	Background DAC error	
256	Steps lost in x direction	
257	Steps lost in y direction	
258	Steps lost in x and y direction	
261	Data reception failed	
262	Data reception incomplete	
263	Wrong character	
264	RTS/CTS connection missing	
265	Test connector missing	
266	Ethernet test failed	
267	Ethernet test failed	
268	Ethernet test failed	
269	Ethernet test failed	
271	Stimulus size	
272	Stimulus size	
273	Stimulus size	
300	Internal printer package error	
301	Printer not supported	
302	No printer selected	
303	Resolution not supported	
304	Illegal paper size	
305	Required cartridge not installed	
306	Function not supported	
307	Quality/duplexer not supported	
308	General printer error	
309	Add paper and press resume	
310	Paper jam	
311	Print job canceled by user	
316	Printer is offline	
317	Printer is busy	
318	Close printer cover	
330	USB timeout or no cable	
331	Unknown USB device	
333	Internal USB package error	
451	Data reset - check time	
452	Examination buffer cleared	
453	Setup set to defaults	
454	Setup modified by new software	

12 APPENDIX

12.1 Technical Data

Manufacturer

HAAG-STREIT AG
 Gartenstadtstrasse 10
 CH-3098 Koeniz / Switzerland

Instrument

	OCTOPUS 301	OCTOPUS 311
Designation:		
Power requirements:	100 - 240 V AC, 50 / 60 Hz	100 - 240 V AC, 50 / 60 Hz
Power consumption:	40 VA	40 VA
Fuses:	2 x T3.15 A H 250 V	2 x T3.15 A H 250 V
Classification:	Class I, Type B applied parts	Class I, Type B applied parts
Measurements (W x L x H):	450 x 530 x 560 mm	450 x 530 x 560 mm
Footprint:	0.20 m ² (450 x 450 mm)	0.20 m ² (450 x 450 mm)
Weight:	22 kg	22 kg
Shipping size:	500 x 580 x 660 mm	500 x 580 x 660 mm
Shipping weight:	35 kg	35 kg
Temperature:	Operation: +15°C ... +40°C Storage, transport: -20°C ... +60°C	Operation: +15°C ... +40°C Storage, transport: -20°C ... +60°C
Humidity:	Operation: 20% ... 75% Storage, transport: 10% ... 95%	Operation: 20% ... 75% Storage, transport: 10% ... 95%
Operation principle:	Direct projection perimeter	Direct projection perimeter
Examination principle:	Bracketing procedure	Bracketing procedure
patient positioning:	Adjustable headrest	Adjustable headrest
Fixation monitoring:	Permanent video monitoring	Permanent video monitoring
Eccentricity:	30°	30°
Stimulus range:	0 ... 40 dB	0 ... 40 dB
Accuracy:	1dB	1dB
Max. stimulus intensity:	1592 cd/m ² (5000 asb)	1592 cd/m ² (5000 asb)
Stimulus color (I):	yellow (590 nm)	yellow (590 nm)
Stimulus color (II):	-----	blue (480 nm)
Stimulus size:	Goldmann III, V	Goldmann III, V
Stimulus duration:	100 ms, 200 ms	100 ms, 200 ms
Stimulus interval:	adaptive, fixed 1.5 ... 4 sec	adaptive, fixed 1.5 ... 4 sec
Background intensity (I):	10 cd/m ² (31.4 asb)	10 cd/m ² (31.4 asb)
Background color (I):	white (LED)	white (LED)
Background intensity (II):	-----	100 cd/m ² , (314 asb)
Background color (II):	-----	yellow (530 nm)
Interfaces:	RS232, USB (Printer)	RS232, Ethernet, USB (Printer)
Display device:	Color LCD (640 x 480 pixels)	Color LCD (640 x 480 pixels)
Data input:	Resistive Touch module	Resistive Touch module

Instrument Table

Designation:	M-Table 300
Power requirements:	100 V AC / 60 Hz, 115 V AC / 60 Hz, 250 V AC / 50 Hz
Power consumption:	100 / 115 V AC / 1 A, 250 V AC / 0.5 A
Fuses:	2 x T4 A H 250 V
Measurements (W x L x H):	600 x 520 x 680 / 880 mm
Footprint:	0.31 m ² (600 x 520 mm)
Weight:	15 kg
Shipping size:	650 x 570 x 730 mm
Shipping weight:	20 kg
Operation principle:	Motorized spindle column (continuously electrically adjustable)

Safety Regulations

The perimeter complies with the EN 60601-1, Safety Class I, Type B instrument.

EMC

The OCTOPUS Perimeter 301/311 complies with the requirements of the 89/336/EEC directive for 'Electromagnetic Compatibility'. The instrument is designed and manufactured in such a way that generation and emission of electro magnetic parasitic signals are limited to levels that other appliances are not influenced in their specified functions. Adequate inherent consistency against externally interfering electromagnetic signals is provided.

Technical specifications subject to change without notice.

OCTOPUS 301 / 311 CE Symbol



This medical device is in conformity with the following directives and standards.

For this it is marked with the CE symbol.

Directives

- 93/42/EWG Medical Devices
- 89/336/EWG Electromagnetic Compatibility (EMC)

Standards

- EN 60601-1:1990
- EN 60601-1/A1:1993
- EN 60601-1/A2:1995
- EN 60601-1/A13:1996
- EN 60601-1-2:1993
- ISO 12866